

JUN. 16. 2005 6:04PM

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NO. 3548 P. 1

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From: Donald R. Studebaker	Date: June 16, 2005	No. of Pages: 21 (including this page)
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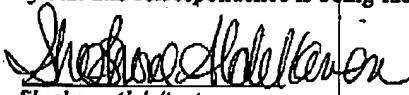
The following document(s) are being presented for facsimile filing in the United States Patent and Trademark Office:

1. Transmittal
2. Fee Transmittal
3. Amendment

In re PATENT Application of
 Inventor(s): Ravenscroft, et al.
 Filed: November 12, 2003
 Serial No.: 10/05,226
 For: Medical Device Anchor and Delivery System

CERTIFICATE OF TRANSMISSION [37 CFR 1.8(a)]

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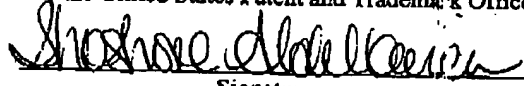
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W660369.1

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/705,226
		Filing Date	November 12, 2003
		First Named Inventor	Ravenscroft, et al.
		Group Art Unit	3731
		Examiner Name	Tan-Uyen T. Hu
Total Number of Pages in This Submission	20	Attorney Docket Number	032085-2

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name Donald R. Studebaker (Reg. No. 32,815) Nixon Peabody LLP 401 9th Street, N.W. Suite 900 Washington, D.C. 20004-2128	
Signature	
Date	June 16, 2005

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June 16, 2005 Date	 Signature Shoshone Abdulkeriem Typed or printed name

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Effective on 12/08/2004,
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL FOR FY 2005

Complete if Known

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)
\$50.00

Application Number 10/705,226
Filing Date November 12, 2003
First Named Inventor Ravenscroft, et al.
Examiner Name Tan-Uyen T. Ho
Art Unit 3731
Attorney Docket No. 032085-2

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):

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FEE CALCULATION

1. BASIC FILING, SEARCH AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Fee (\$)

Small Entity Fee (\$)

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

50

25

Multiple document claims

200

100

Total Claims

360

180

Extra Claims

Fee (\$)

Fee Paid (\$)

Multiple Dependent Claims

36 - HP = 30

6

x

\$ 25.00

= \$ 150.00

Fee (\$)

Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20

Indep. Claims

Extra Claims

Fee (\$)

Fee Paid (\$)

8 - 3 or HP = 4

4

x

\$ 100.00

= \$ 400.00

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets

Extra Sheets

Number of each additional 50 or fraction thereof

Fee (\$)

Fee Paid (\$)

- 100 =

/ 50 =

(round up to a whole number)

x

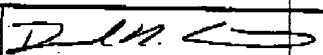
4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

SUBMITTED BY

Signature



Registration No. 32,815
(Attorney/Agent)

Telephone 202-581-8000

Name (Print/Type)

Donald R. Studebaker

Date June 16, 2005

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 10/705,226) Confirmation No. 3541
Applicant : Ravenscroft, et al.) Date: June 16, 2005
Filed : November 12, 2003)
TC/A.U. : 3731
Examiner : Tan-Uyen T. Ho
Docket No. : 032085-000002

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June 16, 2005
Date

Shoshone Abdulkarim
Shoshone Abdulkarim

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Please amend the application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of the paper.

Remarks/Arguments begin on page 15 of this paper.

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06/17/2005 SFELEKE1 00000043 192380 10705226

01 FC:2201 400.00 DA
02 FC:2202 150.00 DA

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